

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Yoshitaka UEDA
Title: SEMICONDUCTOR DEVICE
Appl. No.: Unassigned
Filing Date: July 28, 2003
Examiner: Unassigned
Art Unit: Unassigned



UTILITY PATENT APPLICATION
TRANSMITTAL

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Yoshitaka UEDA

Enclosed are:

- [X] Application Data Sheet (37 CFR 1.76) (2 pages).
- [X] Specification, Claim(s), and Abstract (26 pages).
- [X] Formal drawings (12 sheets, Figures 1(a), 1(b), 2, 3(a), 3(b), 4(a), 4(b), 5(a), 5(b), 6, 7(a), 7(b), 8, 9(a), 9(b), 9(c), 10(a), 10(b), 10(c), 10(d), 11, 12, 13(a), 13(b)).
- [X] Declaration and Power of Attorney (4 pages).
- [X] Assignment of the invention to NEC Electronics Corporation (2 pages).
- [X] Assignment Recordation Cover Sheet.
- [X] Claim for Convention Priority and Priority Document.
- [X] Information Disclosure Statement (2 pages)
- [X] Form PTO/SB/08 with copies of 4 listed reference(s).

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07/28/03

Atty. Dkt. No. 016891-0858

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$750.00	\$750.00
Total Claims:	11	- 20	= 0	x \$18.00	= \$0.00
Independents:	2	- 3	= 0	x \$84.00	= \$0.00
If any Multiple Dependent Claim(s) present:			+	\$280.00	= \$0.00
				SUBTOTAL:	= \$750.00
[]				Small Entity Fees Apply (subtract 1/2 of above):	= \$0.00
				TOTAL FILING FEE:	= \$750.00
Assignment Recordation Fee:			+	\$40.00	= \$40.00
				TOTAL FEE	= \$790.00

- [X] A check in the amount of \$790.00 to cover the filing fee and fee for recordation of Assignment is enclosed.
- [] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: July 28, 2003

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Customer Number: 22428




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